## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

	FOR LINE NUMBER:				PAGE 217 OF			;	37		
Use separate schedule(s)	(check only one)										
for each category of the Detailed Summary Page	>	11a		11b		11c		12			
	lΓ	13		14		15		16		17	

	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) PFIZER INC. PAC		
Full Name (Last, First, Middle Initial)  Claudia Bridgeford Poteet  Mailing Address Pfizer Inc  Corporate Affairs/Govt Related City  Washington  FEC ID number of contributing federal political committee.  Name of Employer  Pfizer Inc  Receipt For:  Primary  General  Other (specify)	State Zip Code DC 20004  C  Occupation Director Govt Relations  Aggregate Year-to-Date ▼  1250.04	Date of Receipt  M M M
Full Name (Last, First, Middle Initial)  Kimberly C. Pratt  Mailing Address 400 Perimeter Walk  Pfizer Regional Mgmt Office  City  Atlanta  FEC ID number of contributing federal political committee.  Name of Employer Pfizer Inc  Receipt For:  Primary  General  Other (specify)	State Zip Code GA 30338-7503  C  Occupation Sr Manager Dist Mgmt-Pharm  Aggregate Year-to-Date ▼  250.08	Date of Receipt  M M M / B J / Y J Y J Y J Y J Y J Y J Y J Y J Y J
Full Name (Last, First, Middle Initial)  Ronald Tracy Price  Mailing Address 400 Perimeter Walk  Pfizer Regional Mgmt Office  City  Atlanta  FEC ID number of contributing federal political committee.  Name of Employer  Pfizer Inc  Receipt For:  Primary  General  Other (specify)	State Zip Code GA 30338-7503  C  Occupation Sales/AM-2 Sls Rep-Spec Ph  Aggregate Year-to-Date ▼  250.08	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	291.70
TOTAL This Period (last page this line number	er only)	